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CONFIRMATION NO. 3975

Bib Data Sheet

SERIAL NUMBER 10/663,694	FILING DATE 09/17/2003 RULE	CLASS 438	GROUP ART UNIT 2823	ATTORNEY DOCKET NO. M4065.0747/P747
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APPLICANTS

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** CONTINUING DATA *****

JAH Non

** FOREIGN APPLICATIONS *****

JAH Non

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** 12/13/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY ID	SHEETS DRAWING 9	TOTAL CLAIMS 83	INDEPENDENT CLAIMS 9
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <u>Thomas R. Davis</u> Initials <u>TRD</u>				

ADDRESS

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TITLE

Masked spacer etching for imagers

FILING FEE RECEIVED 2388	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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